Please type a plus sign (+) inside this box → +

Approved for use through 09/30/00. CMB 0651-0032 Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

CONTINUED PROSECUTION APPLICATION (CPA) REQUEST TRANSMITTAL

Submit an original, and a duplicate for fee processing. (Only for Continuation or Divisional applications under 37 CFR 1.53(d))

CHECK BOX, if applicable: **DUPLICATE**

Address to:

Assistant Commissioner for Patents Box CPA Washington, DC 20231

Attorney Docket No.	DN38240R1		
First Named Inventor	Durbin, et al.		
Examiner Name	Chen, W.		
Total Pages	2		
Express Mail Label No.	EE583087037US		

	_							
This is a request for a								
(continued prosecution application (CPA)) of prior application number 08/879,467								
filed on June 20, 1997, entitled: Coder Reader Performing Coded Image Decoding Using Non-Dedicated Decode Processor								
NOTES								
FILING QUALIFICATIONS: The prior application identified belove must be a nonprovisional application that is either: (1) complete as defined by 37 C.F.R. § 1.51(b), or (2) the national stage of an international application in compliance with 35 U.S.C. 371. A Notice will be placed on a patent issuing from a CPA, except for reissues and designs, to the effect that the patent issued on a CPA and is subject to the twenty-year patent term provisions of 35 U.S.C. § 154(a)(2). Therefore, the prior application of a CPA may have been filed before, on or after June 8, 1995. C-I-P NOT PERMITTED: A continuation-in-part application cannot be filed as a CPA under 37 C.F.R. § 1.53(d), but must be filed under 37 C.F.R. § 1.53(b). EXPRESS ABANDONMENT OF PRIOR APPLICATION: The filing of this CPA is a request to expressly abandon the prior application as of the filing date of the request for a CPA. 37 C.F.R. 1.53(b) must be used to file a continuation, divisional, or continuation-in-part of an application that is not to be abandoned. ACCESS TO PRIOR APPLICATION: The filing of this CPA will be construed to include a waiver of confidentiality by the applicant under 35 U.S.C. 122 to the extent that any member of the public who is entitled under the provisions of 37 C.F.R. § 1.14 to access to, copies of, or information concerning, the prior application may be given similar access to, copies of, or similar information concerning, the other application or applications in the file jacket. 35 U.S.C. 120 STATEMENT: In a CPA, no reference to the prior application is needed in the first sentence of the specification and none should be submitted. If a sentence referencing the prior application is submitted, it will not be entered. A request for a CPA is the specific reference required by 35 U.S.C. 120 and to every application assigned the application number identified in such request, 37 C.F.R. § 1.78(a).								
 Enter the unentered amendment previously filed on <u>August 18, 1999</u>. under 37 C.F.R. § 1.116 in the prior nonprovisional application. 								
2. A preliminary amendment is enclosed.								
3. This application is filed by fewer than all the inventors named in the prior application, 37 C.F.R. § 1.53(d)(4). a. DELETE the following inventor(s) named in the prior nonprovisional application:								
 b.								
a. PTO-1449								
b. Copies of IDS Citations								
[Page 1 of 1]								

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case: Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner, for Patents, Box CPA, Washington, DC 20231.

09/22/1999 TTRAN1

00000054 08879467

01 FC:131

760.00 OP

PTO/SB/29 (1/98)

lease type a plus sign (+) inside this box →

Approved for use through 09/30/00. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

TOTAL CLAIMS (7 CF.R. 1960 or 0) (8 ASIG FEE (760.00) (8 ASIG FEE (760.00) (9 CF.R. 1960 or 0) Reduction by 50% for filling by small entity (Note 37 C.F.R. § 1.9, 1.27, 1.28). TOTAL = \$760.00 Reduction by 50% for filling by small entity (Note 37 C.F.R. § 1.9, 1.27, 1.28). TOTAL = \$760.00 6. Small entity status: a.		CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS			
INDEPENDENT CLAIMS 0 - 3" = 0	I	<u> </u>	TOTAL CLAIMS		T .					
MULTIPLE DEPENDENT CLAIMS (if applicable) (37 C.F.R. § 1.16(d) x\$ 0.00.00			INDEPENDENT CLAIMS	0 - 3** =	0	x \$78.00	000.00			
Total of above Calculations = \$760.00			MULTIPLE DEPENDEN	T CLAIMS (if applicab	le) (37 C.F.R. § 1.16(d)	x \$	00.00			
Total of above Calculations = \$760,00							760.00			
6. Small entity status: a. A small entity statement is enclosed. b. A small entity statement was filed in the prior nonprovisional application and such status is still proper and desired. c. is no longer claimed. 7. The Commissioner is hereby authorized to credit overpayments or charge the following fees to Deposit Account No. 01-0660/044220.0024. a. Sere required under 37 C.F.R. § 1.16. b. Fees required under 37 C.F.R. § 1.17. c. Fees required under 37 C.F.R. § 1.18. 8. A check in the amount of \$760.00 is enclosed 9. Other: Return postcard NOTE: The prior application's correspondence address will carry over to this CPA UNLESS a new correspondence address is provided below. 10. NEW CORRESPONDENCE ADDRESS Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) or New correspondence addressed below: 11. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED Name (Print/Type) J. Davis Gilmen Signature Registration No. (Attorney/Agent) P.44,711					Total of above Cald		\$760.00			
6. Small entity status: a.			Reduction by 50%	or filing by small entity	(Note 37 C.F.R. §§ 1.9,	1.27, 1.28).				
a. A small entity statement is enclosed. b. A small entity statement was filed in the prior nonprovisional application and such status is still proper and desired. c. is no longer claimed. 7. The Commissioner is hereby authorized to credit overpayments or charge the following fees to Deposit Account No. 01-0660/04420.0024. a. Sees required under 37 C.F.R. § 1.16. b. Fees required under 37 C.F.R. § 1.17. c. Fees required under 37 C.F.R. § 1.18. 8. A check in the amount of \$760.00 is enclosed 9. Other: Return postcard NOTE: The prior application's correspondence address will carry over to this CPA UNLESS a new correspondence address is provided below. 10. NEW CORRESPONDENCE ADDRESS Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) or New correspondence addressed below NAME ADDRESS CITY STATE ZIP CODE FOR THE PLEPHONE FAX COUNTRY TELEPHONE SIgnature PA4.711						TOTAL =	\$760.00			
NAME ADDRESS CITY STATE COUNTRY STATE TELEPHONE 11. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED Name (Print/Type) Signature Registration No. (Attorney/Agent) 10. NEW CORRESPONDENCE ADDRESS (Insert Customer No. or Attach bar code label here) or New correspondence addressed below TC New correspondence addressed below TC STATE ZIP CODE FAX SB Name (Print/Type) J. Davis Gilmen Signature		 a. A small entity statement is enclosed. b. A small entity statement was filed in the prior nonprovisional application and such status is still proper and desired. c. is no longer claimed. 7. The Commissioner is hereby authorized to credit overpayments or charge the following fees to Deposit Account No. 01-0660/044220.0024. a. Fees required under 37 C.F.R. § 1.16. b. Fees required under 37 C.F.R. § 1.17. c. Fees required under 37 C.F.R. § 1.18. 8. A check in the amount of \$760.00 is enclosed 								
NAME ADDRESS CITY STATE COUNTRY STATE TELEPHONE 11. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED Name (Print/Type) Signature Registration No. (Attorney/Agent) 10. NEW CORRESPONDENCE ADDRESS (Insert Customer No. or Attach bar code label here) or New correspondence addressed below TC New correspondence addressed below TC STATE ZIP CODE FAX SB Name (Print/Type) J. Davis Gilmen Signature			The prior applie	ation's correspond	dence address will	carry over to	this CPA UNI ESS a			
Customer Number or Bar Code Label NAME ADDRESS CITY STATE STATE TELEPHONE 11. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED Name (Print/Type) Signature Registration No. (Attorney/Agent) Registration No. (Attorney/Agent) Name (Parity Type) Registration No. (Attorney/Agent) ATTORNEY P-44,711	NOTE: new correspondence address is provided below.									
NAME ADDRESS CITY STATE ZIP CODE COUNTRY TELEPHONE FAX 6 30 D 11. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED Name (Print/Type) J. Davis Gilmen Signature Registration No. (Attorney/Agent) P-44,711				0. NEW CORRES	PONDENCE ADDR	ESS				
ADDRESS CITY STATE STATE COUNTRY TELEPHONE TILEPHONE Name (Print/Type) Signature Registration No. (Attorney/Agent) P-4,711		Custom	er Number or Bar Code Label	(Insert Customer No. or Att	ach bar code label here) o	New corre				
CITY STATE ZIP CODE COUNTRY TELEPHONE FAX 6 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	N	AME					Z 20 70			
TELEPHONE 11. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED Name (Print/Type) Signature Registration No. (Attorney/Agent) P-44,711	A	DDRESS					- ~			
11. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED Name (Print/Type) Signature Registration No. (Attorney/Agent) P-44,711	C	ITY								
Name (Print/Type) Signature Registration No. (Attorney/Agent) P-44,711	С	OUNTRY		TELEPHONE		F/				
		Name (Print/Type) J. Davis Gilmer								
		Registration No. (Attorney/Agent) P-44,711								